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AR在不同ER状态乳腺癌中的表达及临床病理意义

张 静, 牛 昀, 于 琦, 肖绪祺, 王亚红, 刘子瑜

天津医科大学附属肿瘤医院乳腺病理研究室, 乳腺癌防治教育部重点实验室, 天津市肿瘤防治重点实验室 (天津市300060)

Expression and Clinicopathologic Significance of AR in Breast Cancer with Different ER Status

Jing ZHANG, Yun NI U, Qi YU, Xu-qi XIAO, Ya-hong WANG, Zi-yu LIU

Department of Breast Cancer Pathology and Research Laboratory, Tianjin Medical University Cancer Institute and Hospital, Tianjin 300060, China

摘要

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摘要 探讨雄激素受体 (AR) 在不同雌激素受体 (ER) 状态乳腺癌中的表达与临床病理特征间的关系及预后。方法: 从乳腺浸润性导管癌ER阳性和阴性病例中分别随机选取111例 (ER+组) 与113例 (ER-组), 共计224例。采用免疫组化方法检测AR、ER、PR、HER-2、Ki-67、P53表达, 对不同ER状态乳腺癌中AR表达与临床病理资料及预后因素进行分析。结果: AR在浸润性导管癌中的阳性表达率为67.9% (152/224), ER+组和ER-组分别为80.2% (89/111)、55.8% (63/113)。ER+组中AR的表达与肿瘤大小、组织学分级、pTNM分期和有无淋巴结转移相关 ($P<0.05$); 在ER-组中AR的表达与组织学分级、HER-2表达、绝经状态相关 ($P<0.05$)。单因素生存分析显示在ER+组和ER-组AR阳性者均具有较好的预后 ($P<0.001$, $P=0.046$), Cox多因素回归分析显示在ER+组AR表达可作为影响无瘤生存的独立因素。结论: AR可以作为指导临床内分泌治疗新的靶标, 为不同ER状态乳腺癌激素治疗提供依据。

关键词: 乳腺浸润性导管癌 雄激素受体 雌激素受体 临床病理特征 靶标

Abstract: To investigate the correlation between the expression of androgen receptor (AR) and the clinicopathologic characteristics and prognosis of the breast invasive ductal carcinoma (IDC) of various estrogen receptor (ER) statuses. Methods: From January to December 2004, 111 cases from ER+ cases and 113 cases from ER- cases were randomly allocated into two IDC groups: ER+ group and ER- group. The protein expression of AR, ER, PR, HER-2, Ki-67, and P53 from the 224 IDC cases were assayed using immunohistochemistry. The current study focused on the assessment of protein expressions in the groups (ER+/AR+, ER+/AR-, ER-/AR+, and ER-/AR-) and their main characteristics. The prognostic differences in the cases of different AR and ER status were also evaluated. Results: The positive rate of AR was 67.9% (152/224), and the rate of AR expression was 80.2% (89/111) and 55.8% (63/113) in the ER-positive and ER-negative cases, respectively. The AR expression in the ER-positive tumors was associated with tumor size, histological grade, pTNM, and endocrine therapy ($P < 0.05$). The AR expression in the ER-negative tumors was associated with the histological grade of the tumor, HER2 over-expression, and postmenopausal status ($P < 0.05$). The univariate analysis showed that the patients with AR-positive tumors in the ER+ and ER- groups had significantly better disease-free survival than those with AR-negative tumors ($P < 0.001$, $P = 0.046$). The Cox regression analysis revealed that AR expression is an independent prognostic factor in the ER+ group. Conclusion: AR is expressed in a great number of breast cancers of various ER status and it shows significant correlation with clinical hormone therapy and pathologic prognostic factors. Especially, AR plays a potential role in the clinical management of women patients with ER-negative breast cancer.

Key words: Invasive ductal carcinoma Androgen receptor Estrogen receptor Clinicopathologic characteristics Target

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通讯作者：牛昀 E-mail: yunniu2000@126.com

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地址：天津市河西区体院北环湖西路肿瘤医院内 300060

电话/传真：(022)23527053 E-mail: cjco@cjco.cn cjcotj@sina.com 津ICP备1200315号